

BEFORE THE ARIZONA STATE VETERINARY MEDICAL
EXAMINING BOARD

IN THE MATTER OF:) CASE No.: 22-71
DENNIS WHITE, DVM)
HOLDER OF LICENSE NO. 0885) FINDINGS OF FACT,
FOR THE PRACTICE OF VETERINARY) CONCLUSIONS OF LAW
MEDICINE IN THE STATE OF ARIZONA,) AND ORDER
RESPONDENT.)

The Arizona State Veterinary Medical Examining Board ("Board") considered this matter at its public meeting on July 20, 2022. Dennis White, DVM ("Respondent") appeared on his own behalf for an Informal Interview that was held pursuant to the authority vested in the Board by A.R.S. § 32-2234(A). After due consideration of the evidence, the arguments and the applicable law, the Board voted to issue the following Findings of Fact, Conclusions of Law and Order ("Order").

FINDINGS OF FACT

1. Respondent is the holder of License No. 0885 and is therefore authorized to practice the profession of veterinary medicine in the State of Arizona.

2. On October 28, 2021, "Jazz," a 14.5 year-old female Australian Cattle Dog was presented to Respondent with concerns that the underside of the dog's tongue was red and possibly infected. Respondent noted the dog had severe dental tartar and sublingual irritation on the left side. There were skin masses on the ventral and right lateral thorax. Blood was collected for testing and an oral evaluation with dental cleaning and possible extractions was scheduled for November 3, 2021.

1 3. On November 3, 2021, the dog was presented to Respondent's associate,
2 Dr. Adams, for an oral evaluation and dental with possible extractions. Blood
3 work previously performed was unremarkable. Complainant reported that the
4 dog was eating and drinking normally. She did not want any teeth extracted
5 unless called for permission. Upon examination, the dog appeared to be an
6 acceptable anesthetic candidate and it was agreed to proceed with the oral
7 evaluation.

8 4. An IV catheter was placed and LRS fluids were initiated. The dog was pre-
9 medicated with butorphanol and midazolam IM; induced with propofol IV; and
10 maintained on isoflurane and oxygen. Once under anesthesia, full mouth
11 radiographs were taken and an oral exam was performed. No masses or
12 abscessed teeth noted – there was no indication to extract teeth. Dr. Adams
13 stated that the dog had all the signs consistent with canine ulcerative
14 paradental stomatitis (CUPS). She discussed her findings and presumptive
15 diagnosis with Complainant. They spoke about the chronic painful condition
16 that only had one effective treatment which was to extract all teeth.
17 Respondent further advised that although the lesions in the dog's mouth were
18 typically diagnostic of CUPS, she could not completely rule out autoimmune
19 disease or malignancy without histopathology. Complainant did not want to
20 extract the dog's teeth at that time and declined biopsy of abnormal gingiva.
21 After the dog's teeth were cleaned and polished, she recovered uneventfully.
22 The dog was discharged later that day with Clindamycin 150mg, 60 tablets;
23 give one tablet twice a day for 10 days each month; and Breathalyser Water
24 Additive.

1 5. At discharge, CVT Beck reviewed the discharge instructions with
2 Complainant including the recommendation to routinely brush the dog's teeth,
3 administer the oral antibiotics, and add the dental additive to the dog's water.

4 6. Complainant commented that the dog's breathing was abnormal. CVT
5 Beck stated it was because the dog's throat was sore due to the endotracheal
6 tube. According to CVT Beck, he spoke with Complainant at length regarding
7 the CUPS diagnosis and the complications associated with it. He showed
8 Complainant the pictures taken of the dog's mouth while under anesthesia.
9 CVT Beck advised Complainant to start the antibiotics the next day and
10 Complainant left the premises.

11 7. On November 4, 2021, the dog was drinking less and showed no interest in
12 food. Later that afternoon, the dog started passing large amounts of bloody,
13 green snot, out of her mouth. Due to the dog not eating, Complainant did not
14 start the antibiotics because the instructions stated to give with food.

15 8. Complainant called the premises to report that the dog was not eating,
16 therefore, not receiving the antibiotics; furthermore, the dog was passing
17 bloody, green snot. Reception staff stated that there was not a veterinarian
18 available; therefore, technical staff was advised of what was transpiring.
19 Technical staff relayed that the dog was likely passing drool and it would be
20 fine if the dog went another day without antibiotics.

21 9. On November 5, 2021, the dog was presented to Respondent due to not
22 eating, passing bloody green mucous drool from mouth, and breathing
23 abnormally. Complainant was unable to give medication. Upon exam,
24 Respondent noted that the dog had red, inflamed gingiva due to CUPS
25 infection with increased saliva. Clindamycin 127mg was administered SQ and

1 Entyce was dispensed and instructed to give 1.8mL SQ once a day.
2 Respondent recommended Complainant to be more aggressive with giving
3 the antibiotic and force feeding.

4 10. On November 6, 2021, Complainant called the premises to request pain
5 medication. The dog was not eating or drinking – Complainant was force
6 feeding the dog but the dog was resistant. Respondent approved pain
7 medication and dispensed carprofen and gabapentin.

8 11. The Board concluded that Respondent's conduct fell below the
9 standard of care due to not recommending follow up blood work to assess the
10 patient's condition, failing to recommend hospitalization with supportive care,
11 and recommending at-home care that did not provide for the patient's needs
12 which resulted in further suffering of the patient.

13 12. On November 7, 2021, the dog continued to be anorexic and lethargic;
14 therefore, Complainant presented the dog to Veterinary Specialty Center of
15 Arizona for evaluation. Dr. Vernasco examined the dog and discovered an oral
16 sublingual mass on the left side with associated purulent oral discharge, severe
17 dehydration, and marked inflammatory leukogram, electrolyte derangements,
18 azotemia, mild anemia and severe hyperproteinemia. The dog was hospitalized
19 for rehydration, supportive care and monitoring. IV fluids were administered
20 along with supportive medications.

21 13. That evening, the dog's care was transferred to Dr. Podmayer for
22 overnight monitoring and supportive care. The dog remained stable but the
23 fever persisted. Thoracic radiographs were performed and revealed no
24 evidence of pulmonary nodules. Recheck blood work showed improving
25 hypernatremia but worsening hyperchloremia, as well as mild hypokalemia.

14. The next day, the dog's care was transferred to Dr. Vernasco for continued care. Complainant visited the dog and Dr. Vernasco expressed her concern for an underlying issue that has not been identified. Blood work changes were difficult to fully explain and diagnostics and treatments would likely be extensive and they may make a diagnosis that cannot be treated. After discussion with Dr. Vernasco and visiting the dog, Complainant elected to humanely euthanize the dog.

CONCLUSIONS OF LAW

15. The conduct and circumstances described in the Findings of Fact above, constitutes a violation of **A.R.S. § 32-2232 (12)** as it relates to **A.A.C. R3-11-501**

(1) failure to provide professionally acceptable procedures by not recommending follow up blood work to assess the patient's condition, failing to recommend hospitalization with supportive care, and recommending at-home care that did not provide for the patient's needs resulting in further suffering of the patient.

ORDER

Based upon the foregoing Findings of Fact and Conclusions of Law it is
ORDERED that Respondent's License, No. 0885 be placed on **PROBATION** for a
period of one year, subject to the following terms and conditions that shall be
completed within the Probationary period. These requirements include six (6)
total hours of continuing education (CE) detailed below:

1. IT IS ORDERED THAT Respondent shall provide written proof satisfactory to the Board that he has completed six (6) hours of continuing education (CE); hours earned in compliance with this order shall not be used for licensure

1 renewal. Respondent shall satisfy these **six (6) hours by attending CE in the area**
2 **of diagnostics and examinations.** Respondent shall submit written verification of
3 attendance to the Board for approval.

4 **2. IT IS ORDERED THAT** Respondent shall pay a civil penalty of two hundred
5 fifty dollars (\$250) on or before the end of the Probation period. Civil penalty
6 shall be made payable to the Arizona State Veterinary Medical Examining
7 Board and is to be paid by cashier's check or money order.

8 **3. All continuing education to be completed for this Order shall be pre-**
9 **approved by the Board.** Respondent shall submit to the Board a written outline
10 regarding how he plans to satisfy the requirements in paragraph 1 for its
11 approval **within sixty (60) days** of the effective date of this Order. The outline
12 shall include **CE course details** including, **name, provider, date(s), hours of CE** to
13 be earned, and a **brief course summary**.

14 4. Respondent shall obey all federal, state and local laws/rules governing
15 the practice of veterinary medicine in this state.

16 5. Respondent shall bear all costs of complying with this Order.

17 6. This Order is conclusive evidence of the matters described and may be
18 considered by the Board in determining an appropriate sanction in the event a
19 subsequent violation occurs. In the event Respondent violates any term of this
20 Order, the Board may, after opportunity for Informal Interview or Formal
21 Hearing, take any other appropriate disciplinary action authorized by law,
22 including suspension or revocation of Respondent's license.

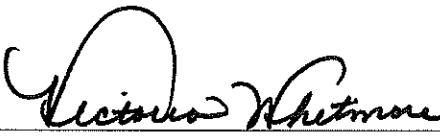
23 **NOTICE OF APPEAL RIGHTS**

24 Respondent is hereby notified that he has the right to request a rehearing
25 or review of the Order by filing a motion with the Board's Executive Director

1 within 30 days after service of this Order. Service of the Order is effective five
2 days after the date of mailing to Respondent. See A.R.S. § 41-1092.09. The
3 motion must set forth legally sufficient reasons for granting a rehearing or
4 review. A.A.C. R3-11-904. If a motion for rehearing or review is not filed, the
5 Board's Order becomes final 35 days after it is mailed to Respondent.
6 Respondent is further notified that failure to file a motion for rehearing or review
7 has the effect of prohibiting judicial review of the Order, according to A.R.S. §
8 41-1092.09(B) and A.R.S. § 12-904, et seq.

9 Dated this 29th day of August, 2022.

10 Arizona State Veterinary Medical Examining Board
11 Jessica Creager, Chairperson

12 By: 

13 Victoria Whitmore, Executive Director

14
15 Original of the foregoing filed this 29th day of August, 2022
16 with the:

17 Arizona State Veterinary
18 Medical Examining Board
19 1740 W. Adams St., Ste. 4600
Phoenix, Arizona 85007

20
21 Copy of the foregoing sent by certified, return receipt mail
this 29th day of August, 2022 to:

22 Dennis White, DVM
23 Address on file
24 Respondent

25 By: 
Board Staff